

**Technology Sciences Group Inc.**

1150 18<sup>th</sup> Street, N.W.  
Washington, DC 20036  
Direct: (202) 828-8998  
E-Mail: [lisa.amadio@tsgconsulting.com](mailto:lisa.amadio@tsgconsulting.com)  
**Lisa M. Amadio**  
**Principal Regulatory Consultant**



a **science group** company

May 12, 2020

Document Processing Desk (NOTIF)  
Attn: Eric Miederhoff, PM31  
Office of Pesticide Programs (7504P)  
U.S. Environmental Protection Agency  
One Potomac Yard, Rm. S4900  
2777 S. Crystal Drive  
Arlington, VA 22202

ELECTRONIC SUBMISSION

Eric,

Subject: Request for Additional Brand Name for Bio-Protect AM500, EPA Reg. No. 87583-2

Technologies Sciences Group, Inc. (TSG) on behalf of PureShield, Inc. is requesting an Additional Brand Name (ABN) for Bio-Protect AM500, EPA Reg. No. 87583-2. The ABN requested is BIOPROTECT 500.

The following materials are enclosed in support of this notification:

- An Application Form (EPA Form 8570-1).

If you have any questions regarding this ABN request, please don't hesitate to contact me at 202-828-8998 or [lisa.amadio@tsgconsulting.com](mailto:lisa.amadio@tsgconsulting.com)

Regards,

A handwritten signature in blue ink that reads 'Lisa M. Amadio'.

Lisa M. Amadio  
Principal Regulatory Consultant  
Agent for PureShield, Inc.

Enclosures

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**Washington, D.C.**

1150 18<sup>th</sup> St., NW, Suite 1000  
Washington, D.C. 20036  
Phone: (202) 223-4392

**California**

980 9<sup>th</sup> Street, Suite 400  
Sacramento, CA 95814  
Phone: (530) 601-5010



**Canada**

275 Slater St., Suite 900  
Ottawa, Ontario K1P 5H9  
Phone: (613) 247-6285

This Notification is consistent with the provisions of PR Notice 98-10 and EPA regulations at 40 CFR 152.46, and no other changes have been made to the labeling or the confidential statement of formula of this product. I understand that it is a violation of 18 U.S.C. Sec. 1001 to willfully make any false statements to EPA. I further understand that if this notification is not consistent with the terms of PR Notice 98-10 and 40 CFR 152.46, this product may be in violation of FIFRA and I may be subject to enforcement action and penalties under section 12 and 14 of FIFRA.

A handwritten signature in blue ink, reading "Lisa M. Amadio". The signature is written in a cursive, flowing style.

Lisa M. Amadio  
Principal Regulatory Consultant  
Agent for PureShield, Inc.

 <div style="display: inline-block; vertical-align: middle;">             United States  <b>Environmental Protection Agency</b>              Washington, DC 20460           </div>		<input type="checkbox"/> <b>Registration</b> <input type="checkbox"/> <b>Amendment</b> <input checked="" type="checkbox"/> <b>Other</b>	OPP Identifier Number
<b>Application for Pesticide - Section I</b>			
1. Company/Product Number <b>87583-2</b>		2. EPA Product Manager <b>Eric Miederhoff</b>	
4. Company/Product (Name) <b>Bio-Protect AM500</b>		3. Proposed Classification PM# <b>31</b> <input type="checkbox"/> None <input type="checkbox"/> Restricted	
5. Name and Address of Applicant (Include ZIP Code) <b>PureShield, Inc.</b> <b>230 S. Broad St., Suite 1201</b> <b>Philadelphia, PA 19102</b> <input type="checkbox"/> Check if this is a new address		6. <b>Expedited Review.</b> In accordance with FIFRA Section 3 (c) (3) (b) (i), my product is similar or identical in composition and labeling to: EPA Reg. No. _____ Product Name _____	
<b>Section - II</b>			
<input type="checkbox"/> Amendment - Explain below		<input type="checkbox"/> Final printed labels in response to Agency letter dated _____	
<input type="checkbox"/> Resubmission in response to Agency letter dated _____		<input type="checkbox"/> "Me Too" Application.	
<input checked="" type="checkbox"/> Notification - Explain below.		<input type="checkbox"/> Other - Explain below.	
<b>Explanation:</b> Use additional Page(s) if necessary. (For section I and Section II)			
<b>Request for Additional Brand Name:</b> BIOPROTECT 500.			
<b>Contact:</b> Lisa M. Amadio, <a href="mailto:lisa.amadio@tsqconsulting.com">lisa.amadio@tsqconsulting.com</a> , 202.828.8998			
<b>Section - III</b>			
<b>1. Material This Product Will Be Packaged In:</b>			
Child-Resistant Packaging <input type="checkbox"/> Yes* <input type="checkbox"/> No	Unit Packaging <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes" Unit Packaging wgt. No. per Container	Water Soluble Packaging <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes" Unit Package wgt. No. Per Container	2. Type of Container <input type="checkbox"/> Metal <input type="checkbox"/> Plastic <input type="checkbox"/> Glass <input type="checkbox"/> Paper <input type="checkbox"/> Other (Specify) _____
3. Location of Net Contents Information <input type="checkbox"/> Label <input type="checkbox"/> Container		4. Size(s) Retail Container	
		5. Location of Label Directions <input type="checkbox"/> On Label <input type="checkbox"/> On Labeling accompanying product	
6. Manner in Which Label is Affixed to Product <input type="checkbox"/> Lithograph <input type="checkbox"/> Paper glued <input type="checkbox"/> Stenciled <input type="checkbox"/> Other _____			
<b>Section - IV</b>			
<b>1. Contact Point (Complete items directly below for identification of individual to be contacted if necessary to process this application.)</b>			
Name <b>Lisa M. Amadio</b>		Title <b>Principal Regulatory Consultant</b>	Telephone No. (Include Area Code) <b>202-828-8998</b>
<b>Certification</b>			6. Date Application Received (Stamped)
I certify that the statements which I have made on this form and all attachments are true, accurate and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.			
2. Signature 		3. Title <b>Principal Regulatory Consultant Agent for PureShield Inc.</b>	
4. Typed Name <b>Lisa M. Amadio</b>		5. Date <b>5-12-20</b>	